

## PURPOSE

The purpose is to establish the policy for the Michigan Department of Health and Human Services (MDHHS) to ensure that the MDHHS implements and maintains policies and procedures to comply with the HIPAA Security Rule. If an action, activity or assessment is required to be documented, maintain a written record of the action, activity or assessment.

## REVISION HISTORY

Reviewed: 01/01/2022.

Next Review: 01/01/2023.

## DEFINITIONS

**ePHI** is the acronym for Electronic Protected Health Information. It is information that can identify a person and contains health related data pertaining to that person.

**PHI** is the acronym for Protected Health Information. It is information that can identify a person and contains health related data pertaining to that person.

**Workforce Member** means employees, volunteers and other persons whose conduct, in the performance of work for a covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity. This includes full and part time employees, affiliates, associates, students, volunteers and staff from third party entities who provide service to the covered entity.

## POLICY

MDHHS shall retain the documentation required by paragraph (b)(1) of section 164.312 for 6 years from the date of its creation or the date when it was last in effect, whichever is later.

MDHHS shall make documentation available to those persons responsible for implementing the procedures to which the documentation pertains.

MDHHS shall review the documentation periodically and update as needed, in response to environmental or operational changes affecting the security of the ePHI in MDHHS systems.

## REFERENCES

45 CFR 164.312(b)(2)(i)

45 CFR 164.312(b)(2)(ii)

45 CFR 164.312(b)(2)(iii)

## CONTACT

For additional information concerning this policy, contact the MDHHS Compliance and Data Governance Bureau at [MDHHSPrivacySecurity@michigan.gov](mailto:MDHHSPrivacySecurity@michigan.gov).